



Application for Admission

INDICATE DESIRED ENTRANCE DATE:

Fall 20_____

PLEASE READ THE FOLLOWING INSTRUCTIONS BEFORE COMPLETING THIS APPLICATION

All questions must be answered and a recent wallet-sized photo attached. A \$25.00 non-refundable application processing fee must accompany this application. When the application, reference forms and transcripts have been received, your file will be reviewed and you will be notified of your status.

PERSONAL INFORMATION

Name _____
Last First Middle

Present Address _____
Number and Street

City State Zip

Permanent Address _____
Number and Street

City State Zip

Telephone () _____

E-mail Address _____

Date of Birth _____ Place _____

Ethnic Origin (Requested to comply with federal guidelines-will not be used to determine admission status)

- American Indian/Alaskan Native
- African American/Black
- Asian
- Caucasian
- Hispanic/Latino
- Multiple
- Native Hawaiian/Other Pacific Islander
- Non-resident Alien
- Other _____

U.S. Citizen? Yes No If No, list country of citizenship _____

Are you a permanent U.S. resident? Yes No

Social Security # _____

Marital Status

- Single Married Separated Divorced
- Widowed Divorced & Remarried

Name of Spouse _____

Has your spouse been previously married? Yes No
If, "yes," is former companion living? Yes No

Children's names and ages _____

If married, do you plan to live in campus housing? Yes No

Are you a veteran of the armed services? Yes No

Veteran's dependent? Yes No

Are you in the National Guard or Reserves? Yes No

Will you be receiving V.A. Educational Benefits? Yes No



Application for Admission continued

EMPLOYMENT

What employment or business experience have you had?

Present occupation? _____

EDUCATIONAL BACKGROUND

Last high school attended _____
Name

City State

TYPE OF HIGH SCHOOL (Check one)

- Public Private School Private Christian School
 Home School

Did you graduate? Yes No When? _____

If not, do you have a GED? Yes No

If currently attending high school, what is the anticipated graduation date _____

Have you attended any educational institutions (i.e. colleges, technical schools, trade school) beyond the high school level? Yes No

If "yes," list below all the institutions attended.

Name _____
Name

Degree Dates Attended

Name _____
Name

Degree Dates Attended

Name _____
Name

Degree Dates Attended

Request official copies of high school and all college transcripts be sent directly to the Office of James River Leadership College.

FAMILY INFORMATION

Parents: Marital Status: Married Separated
 Divorced Widowed

Father's Name _____

Address _____
Number and Street

City State Zip

Phone _____

Christian? Yes No

Living? Yes No

Mother's Name? _____

Address _____
Number and Street

City State Zip

Phone _____

Christian? Yes No

Living? Yes No

If not living with both parents, with whom do you reside?

Relationship to you: Mother Father Spouse
 Legal Guardian Self

BEHAVIOR HISTORY

If you answer "YES" to any of the following questions, explain on separate sheet to be attached to the application.

Have you ever been convicted of a crime other than traffic related offenses? Yes No

If on parol/probation, please give the officer badge number and name? _____

Have you used tobacco, alcohol, or illegal drugs within the last 12 months? Yes No

Have you been involved in immoral sexual activity within the last 12 months? Yes No

Have you been involved in pornography within the last 12 months? Yes No



CHRISTIAN EXPERIENCE

When were you converted? _____

Have you backslidden since conversion? Yes No

Date of rededication? _____

Have you received the Baptism of the Holy Spirit according to Acts 2:4? Yes No

If "yes," when? _____

What church do you attend? _____

Church Address _____
Number and Street

City

State

Zip

Senior Pastor's Name _____

AUTOBIOGRAPHY

In your own words, please provide a one page, typed autobiography that includes:

- a. The story of your conversion.
- b. The journey of your growth in Christ.
- c. Your involvement in Christian leadership and service.
- d. Your expectations and goals as a JRLC student.

REQUIRED FOR ACCEPTANCE DECISION:

- a. Sign and mail to James River Leadership College the completed application, including the autobiography, with a non-refundable \$25 application fee (payable to James River Leadership College) and a recent photo of yourself.
- b. Request that your pastor complete and forward your Pastoral Reference to JRLC.
- c. Request that your educator/counselor complete and forward your Academic Reference to JRLC.
- d. Request that your high school and all college transcripts be forwarded to JRLC.
- e. Provide JRLC with your ACT and/or SAT scores and send all updated scores as you retake the tests.

By signing this application, I am certifying that the information supplied is true and complete. Any falsification or omission of information may be grounds for denial of admission or for dismissal. If I am accepted for admission and enroll as a student at James River Leadership College, I agree to abide by the standards and rules of the College.

Student Signature

Date

Send to:
JAMES RIVER LEADERSHIP COLLEGE
6100 NORTH 19TH STREET
OZARK, MISSOURI 65721
TEL. [417] 581-5433
FAX. [417] 582-0167



Pastor Reference

TO THE APPLICANT:

This reference form should be completed by your pastor and mailed directly to the James River Leadership College (JRLC). References should not be completed by a family member. Please complete the following information and forward this form to your pastor.

Name of Applicant _____

Address of Applicant _____

I willingly waive the right of access to confidential statements made on this reference form knowing that this waiver is not required as a condition for admission.

Signature _____

Date _____

TO THE PASTOR:

The person named above has applied for admission to **JRLC**. In order to learn more about the applicant, your comments will be greatly appreciated.

- How long have you known the applicant? _____
- Do you know the applicant Well Fairly Well Casually Name or sight?
- Please check the following areas which represent your opinion of the applicant's behavior and attitudes.

	Excellent	Good	Average	Poor	Very Poor	Unknown
Mental Ability						
Initiative						
Persistence						
Financial Integrity						
Group Cooperation						
Potential Leadership						
Flexibility						
Accepts Instruction						
Christian Character						
Emotional Disposition						
Personal Habits						
Dress						
Personal Grooming						
Speech Patterns						
Health						



4. If known, comment briefly on the family and social background of the applicant.

5. Please comment on the applicant's church involvement.

6. Would you recommend the applicant's admission to **JRLC**?

Yes With Resesvation No

7. Do you additional information you would like to convey by telephone?

Yes No

If "yes," please indicate a telephone number () _____

Your Name _____ Date _____

Occupation _____

Address _____

City _____ Sate _____ Zip _____

Signature _____

When completed, please return this form to:

JAMES RIVER LEADERSHIP COLLEGE

6100 NORTH 19TH STREET
OZARK, MISSOURI 65721
TEL. (417) 581-5433
FAX. (417) 582-0167



Educator Reference

TO THE APPLICANT:

This reference form should be completed by an educator and mailed directly to the James River Leadership College (JRLC). References should not be completed by a family member. Please complete the following information and forward this form to an educator.

Name of Applicant _____

Address of Applicant _____

I willingly waive the right of access to confidential statements made on this reference form knowing that this waiver is not required as a condition for admission.

Signature _____

Date _____

TO THE EDUCATOR:

The person named above has applied for admission to **JRLC**. As part of the application process, each applicant is asked to secure a reference from a former high school or college teacher or counselor. In order to learn more about the applicant, your comments will be greatly appreciated.

1. How long have you known the applicant? _____

2. Do you know the applicant Well Fairly Well Casually Name or sight?

3. Please check the following areas which represent your opinion of the applicant's behavior and attitudes.

	Excellent	Good	Average	Poor	Very Poor	Unknown
Mental Ability						
Initiative						
Persistence						
Financial Integrity						
Group Cooperation						
Potential Leadership						
Flexibility						
Accepts Instruction						
Christian Character						
Emotional Disposition						
Personal Habits						
Dress						
Personal Grooming						
Speech Patterns						
Health						



Employer/Friend Reference

TO THE APPLICANT:

This reference form should be completed by an employer/friend and mailed directly to the James River Leadership College (JRLC). References should not be completed by a family member. Please complete the following information and forward this form to an employer or a friend.

Name of Applicant _____

Address of Applicant _____

I willingly waive the right of access to confidential statements made on this reference form knowing that this waiver is not required as a condition for admission.

Signature _____

Date _____

TO THE EMPLOYER OR FRIEND:

The person named above has applied for admission to **JRLC**. As part of the application process, each applicant is asked to secure a reference from a former high school or college teacher or counselor. In order to learn more about the applicant, your comments will be greatly appreciated.

- How long have you known the applicant? _____
- Do you know the applicant Well Fairly Well Casually Name or sight?
- Please check the following areas which represent your opinion of the applicant's behavior and attitudes.

	Excellent	Good	Average	Poor	Very Poor	Unknown
Mental Ability						
Initiative						
Persistence						
Financial Integrity						
Group Cooperation						
Potential Leadership						
Flexibility						
Accepts Instruction						
Christian Character						
Emotional Disposition						
Personal Habits						
Dress						
Personal Grooming						
Speech Patterns						
Health						



4. If known, comment briefly on the family and social background of the applicant.

5. Please comment on the adaptability and interpersonal relations of the applicant.

6. Would you recommend the applicant's admission to **JRLC**?

Yes With Resesvation No

7. Do you additional information you would like to convey by telephone?

Yes No

If "yes," please indicate a telephone number () _____

Your Name _____ Date _____

Occupation _____

Address _____

City _____ Sate _____ Zip _____

Signature _____

When completed, please return this form to:

JAMES RIVER LEADERSHIP COLLEGE

6100 NORTH 19TH STREET
OZARK, MISSOURI 65721
TEL. (417) 581-5433
FAX. (417) 582-0167

High School Transcript Request Form

Name of High School

Name _____
Last First Middle

Please mail an official copy of my transcript to:

JAMES RIVER LEADERSHIP COLLEGE

6100 NORTH 19TH STREET

OZARK, MISSOURI 65721

TEL. (417) 581-5433

FAX. (417) 582-0167

Present Address _____
Number and Street

City State Zip

Social Security # _____ Date of Birth _____

Signature of student _____ Date _____



JAMES RIVER LEADERSHIP COLLEGE



College Transcript Request Form

Name of High School

Name _____
Last First Middle

Please mail an official copy of my transcript to:

JAMES RIVER LEADERSHIP COLLEGE

6100 NORTH 19TH STREET

OZARK, MISSOURI 65721

TEL. (417) 581-5433

FAX. (417) 582-0167

Present Address _____
Number and Street

City State Zip

Social Security # _____ Date of Birth _____

Signature of student _____ Date _____



JAMES RIVER LEADERSHIP COLLEGE



Transcript Request Form

Name of High School

Name _____
Last First Middle

Please mail an official copy of my transcript to:

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6100 NORTH 19TH STREET

OZARK, MISSOURI 65721

TEL. (417) 581-5433

FAX. (417) 582-0167

Present Address _____
Number and Street

City State Zip

Social Security # _____ Date of Birth _____

Signature of student _____ Date _____



JAMES RIVER LEADERSHIP COLLEGE

